COMBINED D POWER OF A		OR PATENT APPLICATION	DOCKET NO: 50623.140								
As a below named inventor, I hereby declare that:											
The information	n given herein is tru	ue,									
My residence, post office address and citizenship are as stated below next to my name; I BELIEVE I AM THE ORIGINAL, FIRST AND SOLE INVENTOR (if only one name is listed below) OR AN ORIGINAL, FIRST AND JOINT INVENTOR (if plural names are listed below) OF THE SUBJECT MATTER WHICH IS CLAIMED AND FOR WHICH A PATENT IS SOUGHT ON THE INVENTION ENTITLED:											
		Methods Fo	or Coating /	g An Implantable Device							
the specification of which (check only one item below)											
	v	is attached hereto; was filed on as United States Application Serial No.									
	and was amended on(if applicable).										
	was filed on as PCT International Application Serial No.										
			T Article 19	19(if applicable).							
I hereby state that I have reviewed and understand the content of the above-identified specification, including the claims, as amended by any amendment referred to above.											
l acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations Section 1.56(a).											
I hereby claim the benefit under Title 35, United States, §119(e) of any United States provisional application(s) listed below.											
(Application Se	erial No)	(Filing	n Date)								
(Application Serial No.) (Filing Date) I hereby claim foreign priority benefits under Title 35, United States Code, Section 119 of any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America having a filing date before that of the application(s) on which priority is claimed.											
FOREIGN APF PRIORITY OF	PLICATION(S), IF A WHICH WHERE F	ANY, FILED WITHIN 12 (6 if PERMITTED IS HEREBY CL	a Design) -AIMED UN	n) MONTHS PRIOR TO THE FILING DATE OF THIS APPLICATION TH JNDER 35 U.S.C. SEC. 119.							
COUNTRY	APPLICATION OF NUMBER	DATE OF FILING (day, month, year)	DATE OF ISSUE (day, mor year)	CLAIMED							
I hereby claim the benefit under Title 35, United States Code, Section 120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, Section 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, Section 1.56(a) which occurred											

between the filing date of the prior application(s) and the national or PCT international filing date of this application.

	COMBINED DEC	LARATION FO	d AT	ATTORNEY'S DOCKET NO: 50623.140				
	U.S. APPLICATION NO.		U.S. FILING DATE		PATENTED		PENDING	ABANDONED
	PCT APPLICATION	ONS DESIGNA	ATING THE U.S.					
	PCT APPLICATION NO.		. PCT FILING DATE		U.S. SERIAL NUMBERS			
	prosecute this appl 4,826; Victoria Nic 45,039; Aaron Win Nathan Lane, Reg. Bachand, Reg. No.	inger, Reg. No. No. 43,738;						
	Send correspon	end correspondence to Squire, Sanders & Dempse One Maritime Plaza, Suite 3 San Francisco, CA 94111		uite 300	 		e Calls To: rrigan: 415 954-0323	
1	FULL NAME OF INVENTOR			FIRST N Wouter	AME		MIDDLE NAME E.	
7 Wil	RESIDENCE & CITIZENSHIP	CITY Palo Alto		STATE C	OR FOREIGN COUNTR a	Υ	COUNTRY OF CITIZENSHIP Netherlands	
	POST OFFICE ADDRESS	STREET 36 Roosevelt Circle			CITY Palo Alto		STATE OR COUNTRY California	ZIP CODE 94306
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J. 3. J. 1	FULL NAME OF INVENTOR	LAST NAME		FIRST	IAME		MIDDLE NAME	
i ii	RESIDENCE & CITIZENSHIP	CITY		STATE	OR FOREIGN COUNTF	Υ	COUNTRY OF CITIZENSHIP	
	POST OFFICE ADDRESS	STREET		CITY			STATE OR COUNTRY	ZIP CODE
4	FULL NAME OF INVENTOR			FIRST	IAME		MIDDLE NAME	
	RESIDENCE & CITIZENSHIP	CITY		STATE (Californi	OR FOREIGN COUNTR a	Υ	COUNTRY OF CITIZENSHIP	
	POST OFFICE ADDRESS	CE STREET					STATE OR COUNTRY	ZIP CODE
	I further declare that all-statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, of both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.							
Sign	ature Of Inventor		Signature Of Inventor 2	Pactt	Signature Of Inventor 3		Signature Of Inventor 4	
DAT	E 9/201	01	Stophen DATE Soptember 2	20,2001	DATE	DATE		

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